

AO 435  
(Rev. 04/18)

Case 1:18-cv-00214-JJM-PAS Document 120 Filed 07/10/21 Page 1 of 1 PageID #: 6321

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS

FOR COURT USE ONLY  
DUE DATE:

TRANSCRIPT ORDER

Please Read Instructions:

1. NAME  
John B. Ennis, Esq.

4. DELIVERY ADDRESS OR EMAIL  
jbelaw75@gmail.com

8. CASE NUMBER  
18-cv-214

12. CASE NAME  
Fitch v. FNMA et al

15. ORDER FOR  
☐ APPEAL  
☐ NON-APPEAL

9. JUDGE  
Sullivan

10. FROM  
July 7, 2021

11. TO

13. CITY  
Providence

14. STATE  
RI

15. ORDER FOR  
☐ CRIMINAL  
☒ CIVIL

2. PHONE NUMBER  
401-419-3962

5. CITY  
Cranston

6. STATE  
RI

7. ZIP CODE  
02920

15. ORDER FOR  
☐ CRIMINAL JUSTICE ACT  
☐ IN FORMA PAUPERIS

3. DATE  
July 11, 2021

10. FROM  
July 7, 2021

11. TO

13. CITY  
Providence

14. STATE  
RI

15. ORDER FOR  
☐ BANKRUPTCY  
☒ OTHER Motion hearing

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT	July 7, 2021	Entire hearing	
<input type="checkbox"/> JURY INSTRUCTIONS		<input type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING			
<input type="checkbox"/> BAIL HEARING			

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES		
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			

CERTIFICATION (18. & 19.)  
By signing below, I certify that I will pay all charges (deposit plus additional).

ESTIMATE TOTAL  
\$ 0.00

18. SIGNATURE  
J B Ennis

19. DATE  
July 11, 2021

TRANSCRIPT TO BE PREPARED BY

PROCESSED BY

PHONE NUMBER

COURT ADDRESS

	DATE	BY
ORDER RECEIVED		
DEPOSIT PAID		
TRANSCRIPT ORDERED		
TRANSCRIPT RECEIVED		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT		
PARTY RECEIVED TRANSCRIPT		

DEPOSIT PAID	
TOTAL CHARGES	\$ 0.00
LESS DEPOSIT	\$ 0.00
TOTAL REFUNDED	
TOTAL DUE	\$ 0.00

DISTRIBUTION: COURT COPY TRANSCRIPTION COPY ORDER RECEIPT ORDER COPY